

Customer No.:



67278

PATENT TRADEMARK OFFICE

Docket No.: 5986/1H320US1

**DECLARATION
AND POWER OF ATTORNEY
Original Application**

As a below named inventor, I declare that the information given herein is true, that I believe that I am the original, first and sole inventor if only one name is listed at 1 below, or a joint inventor if plural inventors are named below, of the invention entitled:

**MINIATURE PERSONAL AND AREA RADON AND THORON
MONITOR RELATED APPLICATIONS**

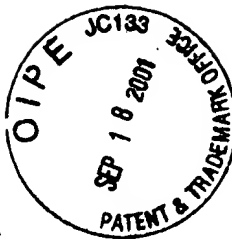
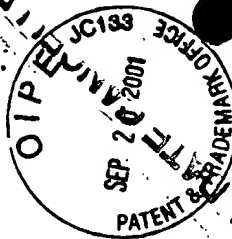
which is described and claimed in:

☐ the attached specification or ☒ the specification in application Serial No. 09/897,751, filed June 29, 2001
(for declaration not accompanying appl.)

that I do not know and do not believe that the same was ever known or used in the United States of America before my or our invention thereof or patented or described in any printed publication in any country before my or our invention thereof, or more than one year prior to this application, or in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to this application, that I acknowledge my duty to disclose information of which I am aware which is material to patentability in accordance with 37 CFR §1.56. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I hereby claim the priority benefits under 35 U.S.C. §119 of any application(s) for patent or inventor's certificate listed below. All foreign applications for patent or inventor's certificate on this invention filed by me or my legal representatives or assigns prior to the application(s) of which priority is claimed are also identified below.

PRIOR APPLICATION(S), IF ANY, OF WHICH PRIORITY IS CLAIMED

<u>COUNTRY</u>	<u>APPLICATION NO.</u>	<u>DATE OF FILING</u>
USA	60/214,973	June 29, 2000



**ALL FOREIGN APPLICATIONS, IF ANY, FILED PRIOR
TO THE APPLICATION(S) OF WHICH PRIORITY IS CLAIMED**

COUNTRY APPLICATION NO. DATE OF FILING

POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark office connected therewith: Gordon D. Coplein #19,165, Michael J. Sweedler #19,937, S. Peter Ludwig #25,351, Paul Fields #20,298, Marc S. Gross #19,614, Joseph B. Lerch #26,936, Melvin C. Garner #26,272, Ethan Horwitz #27,646, Adda C. Gogoris #29,714, Bert J. Lewen #19,407, Henry Sternberg #22,408, Peter C. Schechter #31,662, Robert Schaffer #31,194, Robert C. Sullivan, Jr. #30,499, Ira J. Levy #35,587, Joseph R. Robinson #33,448, Scott G. Lindvall #40,325, Paul F. Fehlner, Ph.D. #35,135, David Leason #36,195, Ya-Chiao Chang #43,407

all of the firm of DARBY & DARBY P.C., 805 Third Avenue, New York, NY 10022

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FULL NAME AND RESIDENCE OF INVENTOR 1

LAST NAME: HARLEY FIRST NAME: Naomi

MIDDLE NAME: H.

CITY: Hoboken STATE OR FOREIGN COUNTRY: NJ

COUNTRY OF CITIZENSHIP: United States

POST OFFICE ADDRESS: 1 Marine View Plaza, Apt. 24E

CITY: Hoboken STATE OR COUNTRY: NJ

ZIP CODE: 07030

FULL NAME AND RESIDENCE OF INVENTOR 2

LAST NAME: CHITTAPORN FIRST NAME: Passaporn

MIDDLE NAME:

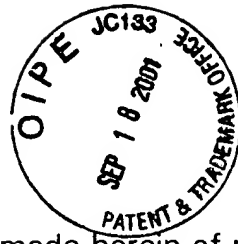
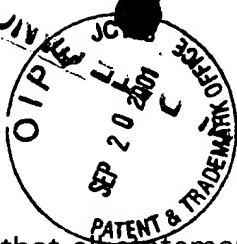
CITY: Hoboken STATE OR FOREIGN COUNTRY: NJ

COUNTRY OF CITIZENSHIP: United States

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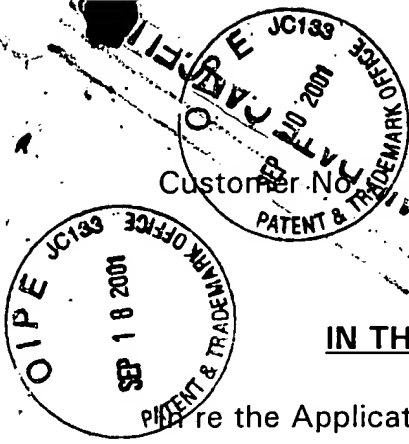


I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 1: Naomi H. Harley DATED: 5 SEPT 2001
Naomi H. Harley

SIGNATURE OF INVENTOR 2: Passaporn Chittaporn DATED: 5 SEPT 2001
Passaporn Chittaporn

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Customer No.



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PATENT TRADEMARK OFFICE

Docket No.: 5986/1H320

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

File the Application or Patent of:

Naomi HARLEY; Passaporn CHITTAPORN

Serial or Patent No: 09/897,751

Filed or Issued: June 29, 2001

For: MINIATURE PERSONAL RADON AND THORON MONITOR

**VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
NONPROFIT ORGANIZATION**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION: **New York University Medical Center**

ADDRESS OF ORGANIZATION: **70 Washington Square South, New York, NY 10012**

TYPE OF ORGANIZATION

- ☒ University or other institution of higher education
- ☐ Tax exempt under Internal Revenue Service Code (26 U.S.C. §501(a) and 501(c)(3))
- ☐ Nonprofit scientific or educational under statute of state of the United States of America
(name of state:)
(citation of statute:)
- ☐ Would qualify as tax exempt under Internal Revenue Service Code (26 U.S.C. §501(a) and 501(c)(3)) if located in the United States of America
- ☐ Would qualify as nonprofit scientific or educational under statute of state of the United States of America if located in the United States of America
(name of state:)
(citation of statute:)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 C.F.R. §1.9(e) for purposes of paying reduced fees under Section 41(a) or (b) of Title 35, United States Code with regard to the invention entitled MINIATURE PERSONAL RADON AND THORON MONITOR by inventor(s) described in

- ☐ the specification filed herewith
☒ application Serial No. 09/897,751, filed June 29, 2001
☐ Patent No. , issued

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above-identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 C.F.R. §1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 C.F.R. §1.9(d) or a nonprofit organization under 37 C.F.R. §1.9(e).

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 C.F.R. §1.27)

FULL NAME: New York University Medical Center

ADDRESS: 70 Washington Square South, New York, NY 10012

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☒ NONPROFIT ORGANIZATION

FULL NAME:

ADDRESS:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 C.F.R. §1.28(b)).

I HEREBY DECLARE THAT ALL STATEMENTS MADE HEREIN OF MY OWN KNOWLEDGE ARE TRUE AND THAT ALL STATEMENTS MADE ON INFORMATION AND BELIEF ARE BELIEVED TO BE TRUE; AND FURTHER THAT THESE STATEMENTS WERE MADE WITH THE KNOWLEDGE THAT WILLFUL FALSE STATEMENTS AND THE LIKE SO MADE ARE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, UNDER SECTION 1001 OF TITLE 18 OF THE UNITED STATES CODE, AND THAT SUCH WILLFUL FALSE STATEMENTS MAY JEOPARDIZE THE VALIDITY OF THE APPLICATION, ANY PATENT ISSUING THEREON, OR ANY PATENT TO WHICH THIS VERIFIED STATEMENT IS DIRECTED.

Name of Person Signing: Abram Goldfinger

Title in Organization: Executive Director, Office of Industrial Liaison

Address of Person Signing: 550 First Avenue, New York, NY 10016

Signature:  Date: 9/5/01

NONPROFIT ORGANIZATION

REV. 06/98